

State of Washington of Ecology Application for a Water Right Please follow the attached instructions to avoid unnecessary

For Ecology Use Fee Paid 10.00 Date 10/2/96

| Name The H | griwpal | Outfit. | Inc | Home Tel: | (509) 697 - | 7633 |
|--|--|--|---|--|--|--|
| Mailing Address | 2741 5 | . Weno | is Rd | Home Tel: | 509) 575 - | 6077 |
| | | | | 942 + 9121 FAX | | |
| X Same as al | bove | | | LL ABOUT TH | | |
| Name Dowg | las | Naya | | Home Tel:(| <u> </u> | |
| Mailing Address | - | - | | Work Tel:(| | |
| City | | State | _ Zip+4 | +FAX | :(| |
| Relationship to apple $\omega \sim 1$ | ncant 1 | eperty | inner of | Subchapter | 5 0 | erpo which |
| Section 3 ST | CATEMI | NT OF I | NTENT | | | |
| The applicant reque ☐ cubic feet per se purpose(s) of ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ | sts a permi | t to use not i | more thane water source of K water | or ground water so | urce (check on . ATT | ns per minute or ly one) for the "ACH A "LEGAL" |
| AECODIBUTOR O | F THE PL | ACE OF U | SE. (See instru | uctions.) NOTE: A tax | | |
| not sufficient. | | antity to be | used in acre-fe | et per year: 85 | .7 | |
| not sufficient. Estimate a maximum Check if the needed: From | m annual que water use | is proposed _/ to | | n project. Indicate the | | that the water will b |
| Check if the needed: Section 4. W | m annual que water use m/ ATER S | is proposed _/ to | for a short-term | n project. Indicate the | period of time | that the water will b |
| Check if the needed: Section 4. W | m annual que water use m/_ ATER S | is proposed _/ to OURCE | for a short-term | n project. Indicate the | period of time | |
| Section 4. Estimate a maximum Check if the needed: | m annual que water use m/_ ATER S ATER ource and in med, write " etc.: Cyeek | is proposed _/ to OURCE indicate if stre "unnamed sp | for a short-term | n project. Indicate the | period of time | |
| Check if the needed: From Section 4. W If SURFACE W Name the water so lake, etc. If unna "unnamed stream, we way to so the so the solution of the solution o | m annual que water use m/_ ATER S ATER ource and in med, write " etc.: C ~ eek ions: | is proposed _/ to OURCE indicate if stre "unnamed sp | eam, spring, pring," | n project. Indicate the | period of time | |
| Section 4. W If SURFACE W Name the water so lake, etc. If unna "unnamed stream, Wenne Source flows into | m annual que water use m/_ ATER S ATER ource and in med, write " etc.: C ~ eek ions: | is proposed _/ to OURCE indicate if stre "unnamed sp | eam, spring, pring," | If GROUNDWAT A permit is desired | period of time | |
| Section 4. W If SURFACE W Name the water so lake, etc. If unna "unnamed stream, Wenas Number of diversions of the source flows into YAKIMA LOCATION Enter the north-spearest section of | m annual que water use m/_ ATER S ATER S ource and in med, write " etc.: | is proposed _/ to OURCE Indicate if street in the str | eam, spring, pring, " | If GROUNDWAT A permit is desired | TER for ll(s): | _ well(s). |
| Section 4. W If SURFACE W Name the water so lake, etc. If unna "unnamed stream, Wenne Source flows into YAKIMA LOCATION Enter the north-spearest section of | m annual que water use m/_ ATER S ATER S ource and in med, write " etc.: | is proposed _/ to OURCE Indicate if street in the str | eam, spring, pring, " | If GROUNDWAT A permit is desired Size & depth of well t from the point of di | period of time TER for (I(s): | thdrawal to the |
| Section 4. W If SURFACE W Name the water so lake, etc. If unna "unnamed stream, Wenas Number of diversions of the source flows into YAKIMA LOCATION Enter the north-spearest section of | m annual que water use m/_ ATER S ATER S Ource and in med, write " etc.: | is proposed _/ to OURCE Indicate if stre "unnamed spody of water RR east-west dia | eam, spring, pring, " stances in feet | If GROUNDWAT A permit is desired Size & depth of well t from the point of di | period of time TER for (I(s): | thdrawal to the Corner of source is platted, complete below: |
| Section 4. W If SURFACE W Name the water so lake, etc. If unna "unnamed stream, Wence" Number of diversions of the source flows into Yakima LOCATION Enter the north-snearest section of 170 Ft | m annual que water use m/_ ATER S ATER S Ource and in med, write " etc.: | is proposed _/ to OURCE Indicate if stre "unnamed spody of water east-west dia | eam, spring, pring, " stances in feet 350 F | If GROUNDWAT A permit is desired Size & depth of well t from the point of di | reriod of time TER for Il(s): Version or with the state of the sta | well(s). thdrawal to the Corner of source is platted, complete below: |

ECY 040-1-14 Rev. 9/95 F

APPLICATION

Appl. No.: <u>54-32486</u>

| Sec | ion 5. GENERAL WATER SYSTEM INFORMATION | |
|-----|---|----------|
| Α. | Name of system, if named: | |
| В. | Briefly describe your proposed water system. (See instructions.) | |
| | Divert From creek with 10 hp pump. Pump dischar | روخ |
| | ic mainline. Mainline system is intertied with | 0 |
| | her surface and ground water sources. Water will | |
| Car | ningle with water From these sources. | |
| C. | Do you already have any water rights or claims associated with this property or system? YES D PROVIDE DOCUMENTATION. See enclosed Well Permit # G3-Z1457 F | |
| | ion 6. DOMESTIC / PUBLIC WATER SUPPLY SYSTEM INFORMATION inpleted for all domestic/public supply uses.) | |
| A. | Number of "connections" requested: Type of connection | _ |
| В. | (Homes, Apartment, Recreational, e | NO |
| Com | plete C. and D. only if the proposed water system will have fifteen or more connection | ns. |
| C. | Do you have a current water system plan approved by the Washington State Department of Health? If yes, when was it approved? Please attach the current approved version of your plan. | NO |
| D. | Do you have an approved conservation plan? If yes, when was it approved? Please attach the current approved version of your plan. | |
| | tion 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION mplete for all irrigation and agriculture uses.) | |
| A. | Total number of acres to be irrigated: 19.05 | |
| В. | List total number of acres for other specified agricultural uses: | |
| | UseAcres | |
| | Use Acres Use Acres | |
| C. | Total number of acres to be covered by this application: 19.05 | |
| D. | Family Farm Act (Initiative Measure Number 59, November 3, 1977) | |
| D. | Add up the acreage in which you have a controlling interest, including only: | |
| | ‡ Acreage irrigated under water rights acquired after December 8, 1977; ‡ Acreage proposed to be irrigated under this application; ‡ Acreage proposed to be irrigated under other pending application(s). | |
| | Is the combined acreage greater than 2000 acres? Do you have a controlling interest in a Family Farm Development Permit? If yes, enter permit no: | NO NO |
| E. | Farm uses: Stockwater - Total # of animals | |



Section 8. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water?

□ YES M NO

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point, and some portion of the storage will be above grade, you must also apply for a reservoir permit. You can get a reservoir permit application from the Department of Ecology.

Section 9. DRIVING DIRECTIONS

Provide detailed driving instructions to the project site. Project is 27 miles North and West & Selah, WA. at 2741 South Wenes Rd.

Place of use is \$500 LF North of point of diversion.

Section 10. REQUIRED MAP

A. Attach a map of the project. (See instructions.)

Section 11. PROPERTY OWNERSHIP

- A. Does the applicant own the land on which the water will be used?

 If no, explain the applicant's interest in the place of use and provide the name(s) and address(es) of the owner(s):
- B. Does the applicant own the land on which the water source is located? If no, submit a copy of agreement:

YES - NO

I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though I may have been assisted in the preparation of the above application by the employees of the Department of Ecology, all responsibility for the accuracy of the information rests with me.

Applicant (or authorized representative)

Oct 14, 1996

Date

Landowner for place of use (if same as applicant, write "same")

Date

| We are returning your application for the following reason(s): | | |
|---|---------------|--|
| Examination fee was not enclosed | | APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128 |
| Section number(s) ncomplete | _ is/are | APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE |
| Explanation: Please provide the additional information requested above and (date). | l return your | application by |

Use this page to continue your answers to any questions on the application. Please indicate section

number before answer.

To receive this document in alternative format, contact Lisa Newman at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).